

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New Day Independent Media Committee		FEC IDENTIFICATION NUMBER ▼ C C00582973
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee New Day Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2016
Mailing Address 501 Morrison Road Suite 201		Amount 161448.00
City Gahanna	State OH	Zip Code 43230
Purpose of Expenditure Media Buy	Category/ Type	Transaction ID : SE.4298 Date of Disbursement or Obligation MM / DD / YYYY 04 / 13 / 2016
Name of Federal Candidate DONALD J TRUMP		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee New Day Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2016
Mailing Address 501 Morrison Road Suite 201		Amount 161448.00
City Gahanna	State OH	Zip Code 43230
Purpose of Expenditure Media Buy	Category/ Type	Transaction ID : SE.4299 Date of Disbursement or Obligation MM / DD / YYYY 04 / 13 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	322896.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Susan E. Jones

[Electronically Filed]

Date

 MM / DD / YYYY
04 / 13 / 2016

Signature